FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

_/ 🔾	1647							
OMB APPROVAL								
OMB Number:	3235-0076							
Expires:	May 31, 2005							
Estimated averag	Estimated average burden							
hours per respor	nse 16.00							

SEC USE ONLY							
Prefix	Serial						
DATE RECEIVED							

Name of Offering (check if this is an ame	ndment and name has changed and indicate chang	e.)	
Series A Preferred Stock (including underly	ng Common Stock issuable upon conversion the	ereof)	
Filing Under (Check box(es) that apply): □ Ri	ile 504 🗆 Rule 505 🗵 Rule 506 🗆 Section	4(6) 🗆 ULO	
Type of Filing: New Filing	endment		
	A. BASIC IDENTIFICATION DATA		
1. Enter the information requested about the is	suer		05054291
Name of Issuer (check if this is an amend	ment and name has changed, and indicate change.)	
INTERMAP SYSTEMS, INC.			
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number	(Including Area Code)
1410 62nd Street, Suite A, Emeryville, CA	94608	510-285-0638	
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number	(Including Area Code)
(if different from Executive Offices)			
Brief Description of Business			Wasaaraara
Develop web-based healthcare applications.			L PROCESSEU
			2000
Type of Business Organization			MAY 2 3 2005
•	ership, already formed	cify):	-
☐ business trust ☐ limited partn	ership, to be formed		THOMSON
:	Month Year		FINANCIAL
Actual or Estimated Date of Incorporation or C	<u> </u>	ctual	Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrev		D E
	CN for Canada: FN for other foreign jurisdi	ction	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File. A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

By

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and managing partner of partnership issuers.

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
full Name (Last name first, if individual) Carlick, David
Business or Residence Address (Number and Street, City State, Zip Code) /o VantagePoint Venture Partners, 1001 Bayhill Drive, Suite 300, San Bruno, California 94066
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Harroch, Richard
Business or Residence Address (Number and Street, City State, Zip Code) Vo VantagePoint Venture Partners, 1001 Bayhill Drive, Suite 300, San Bruno, California 94066
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner
Full Name (Last name first, if individual) Knarr, Bob
Business or Residence Address (Number and Street, City State, Zip Code) 1/0 JHK Investments, LLC, 1 Gorham Island, Westport, Connecticut, 06880
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner
Full Name (Last name first, if individual) Shell, West
Business or Residence Address (Number and Street, City State, Zip Code) 2/0 InterMap Systems, Inc., 1410 62nd Street, Suite A, Emeryville, CA 94608
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Stephens, Dean
Business or Residence Address (Number and Street, City State, Zip Code) 2/0 InterMap Systems, Inc., 1410 62nd Street, Suite A, Emeryville, CA 94608
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) JHK Investments, LLC
Business or Residence Address (Number and Street, City State, Zip Code) 1 Gorham Island, Westport, Connecticut, 06880
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) VantagePoint Venture Partners
Business or Residence Address (Number and Street, City State, Zip Code) 1001 Bayhill Drive, Suite 300, San Bruno, California 94066

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

<u></u>							
Check Box(es) that Apply: □	Promoter 🗷	Beneficial Owner		Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)						
Berkowitz, Steven			_		_		
Business or Residence Address	(Number and Str	reet, City State, Zip Coo	de)				
c/o InterMap Systems, Inc., 141	0 62nd Street, St	uite A, Emeryville, CA	94	608			
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)					1.0	
	,						
Business or Residence Address	(Number and St	reet, City State, Zip Coo	de)				
Check Box(es) that Apply: □	Promoter	Beneficial Owner		Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)						
			_				
Business or Residence Address	(Number and St	reet, City State, Zip Coo	de)				
Check Box(es) that Apply: □	Promoter	Beneficial Owner		Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)						
Business or Residence Address	(Number and St	reet, City State, Zip Coo	de)				
Check Box(es) that Apply: □	Promoter 🗅	Beneficial Owner		Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)						
	,			4.4			
Business or Residence Address	(Number and St	reet, City State, Zip Co	de)				

[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [WY] [PR] [FI] Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	:				B. INF	ORMAT	ION ABO	OUT OFF	ERING				
3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or state, list the name of the broker or dealer. If more than five (3) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer ently. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	1. Has the iss	suer sold, or							;?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the mane of the broker or dealer. If more of the state are susceilated person or agent of a broker or dealer dutil the SEC and/or with a state or states, list the mane of the broker or dealer. If more or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States). [Al.] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IN] [IN] [IN] [IN] [IN] [IN] [IN	2. What is th	e minimum	investment t	that will be a	accepted fro	m any indivi	idual?				<u>\$1</u>	0,000	
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	3. Does the	offering peri	mit joint ow	nership of a	single unit?								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	commiss offering. with a sta	ion or simil If a person ate or states,	ar remunera to be listed is list the nam	ation for solution for solution associated the of the broken	icitation of ed person or ker or dealer	purchasers i agent of a b r. If more th	in connection roker or dea an five (5) p	on with sale ler registered persons to be	s of securiti I with the SI e listed are a	ies in the EC and/or			
Name of Associated Broker or Dealer	Full Name (L	ast name fi	rst, if indiv	ridual)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Business or F	Residence A	Address (Nu	ımber and S	Street, City	, State, Zip	Code)						
Check "All States" or check individual States)	Name of Ass	ociated Bro	ker or Deal	ler						<u> </u>			
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Business or F	Residence A	Address (Nu	umber and S	Street, City	, State, Zip	Code)						***************************************
Check "All States" or check individual States)	Name of Ass	ociated Bro	ker or Dea	ler			***************************************			*******		-	
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] [VA] [VA] [VA] [VA] [VA] [VA] [VA] [VA	States in Wh	ich Person	Listed Has	Solicited of	r Intends to	Solicit Pur	rchasers						
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	. □ All States [ID] [MO] [PA]
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)					[IA]	[01]	[VI]	[VA]	[WA]	[44 4]	[**1]	[[[]	[IK]
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)				·	Street, City	State, Zip	Code)			· · · · · · · · · · · · · · · · · · ·			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			·							· · · · · ·			
(Check "All States" or check individual States)					r Intends to	Solicit Pur	rchasers						
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS
E	nter the aggregate offering price of securities included in this offering and the total amount already
	ald Enter "O" if answer is "none" or "zero". If the transaction is an evaluation of faring, check this have

:	Type of Security	Aggregate Offering Price	Amount Alread Sold
:	Debt	\$	\$
	Equity	\$ <u>14,500,000</u>	\$14,500,000
	☐ Common ☒ Preferred*		
	Convertible Securities (including warrants)	\$	\$
:	Partnership Interests	\$	\$
	Other (Specify:)	\$	\$
:	Total	\$ <u>14,500,000</u>	\$14,500,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
t	Inter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number of Investors	Aggregate Dollar Amount of Purchases \$14,500,000
	Accredited Investors	7	\$
	Non-accredited Investors.		
	Total (for filings under Rule 504 only)		\$
	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE.		\$
S			
S	Answer also in Appendix, Column 4, if filing under ULOE. f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first	Type of Security	SDollar Amount
S	Answer also in Appendix, Column 4, if filing under ULOE. f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	Type of	Dollar Amoun
S	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering	Type of Security	Dollar Amoun Sold
S	Answer also in Appendix, Column 4, if filing under ULOE. f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505	Type of Security	Dollar Amoun Sold
S	Answer also in Appendix, Column 4, if filing under ULOE. f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504	Type of Security	Dollar Amount Sold \$
a i i	Answer also in Appendix, Column 4, if filing under ULOE. f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505	Type of Security	Dollar Amount Sold \$ \$ \$
a i i	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not	Type of Security	Dollar Amoun Sold \$ \$
s s s s s s s s s s s s s s s s s s s	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities is told by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	Type of Security	Dollar Amoun Sold \$ \$ \$ \$
s s s s s s s s s s s s s s s s s s s	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	Type of Security	Dollar Amoun Sold \$ \$ \$ \$
s s s s s s s s s s s s s s s s s s s	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities told by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs.	Type of Security	Dollar Amoun Sold \$ \$ \$ \$ \$ \$ \$
s s s s s s s s s s s s s s s s s s s	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs	Type of Security	Dollar Amoun Sold \$ \$ \$ \$ \$ \$ \$
s s s	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505	Type of Security	Dollar Amoun Sold \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
s s s s s s s s s s s s s s s s s s s	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505	Type of Security	Dollar Amount

^{*} Series A Preferred Stock, Common Stock issuable upon conversion of Series A Preferred Stock. 5 of 9

signature cons information fu Issuer (Print or INTERMAP S	urnished by the issuer to any non-accredited investor pursuant to paragraph (b			Date May <u>5</u> , 2005
signature cons information fu Issuer (Print or	Type) Signature	b)(2) of Rule S		_
signature cons information fu	Type) Signature	b)(2) of Rule 5		_
signature cons	irnished by the issuer to any non-accredited investor pursuant to paragraph (t	b)(2) of Rule 5		
	s duly caused this notice to be signed by the undersigned duly authorized per stitutes an undertaking by the issuer to furnish to the U.S. Securities and Exc	change Comm	ission, upon writ	
	D. FEDERAL SIGNATURE			
	olumn Totalsotal Payments Listed (column totals added)			⊠ \$14,425,000 \$14,425,000
: -	ther (specify):			
	Vorking capital			
:	epayment of indebtedness			
of pı	cquisition of other businesses (including the value of securities involved in t ffering that may be used in exchange for the assets or securities of another iss ursuant to a merger)	suer	\$	
C	onstruction or leasing of plant buildings and facilities		\$	□ \$
	urchase, rental or leasing and installation of machinery and equipment			
,	alaries and feesurchase of real estate			
:		_	Payments to Officers, Directors, & Affiliates	Payments To Others
each of check the	below the amount of the adjusted gross proceeds to the issuer used or propose if the purposes shown. If the amount for any purpose is not known, furnish the box to the left of the estimate. The total of the payments listed must equal the distorthe issuer set forth in response to Part C - Question 4.b. above.	an estimate ar	nd	
;				
			SS	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

TC.	CT.	ATE	SIGN	A TT	IDE	
н.,	- N I /	4A I P.	SILAN.	A I I	IKH.	

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions Yes a soft such rule?	No 🗵
	See Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form (17 CFR 239.500) at such times as required by state law.	D
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer offerees.	to
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limit Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption that the burden of establishing that these conditions have been satisfied.	
	issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned authorized person.	d
Issuer	(Print or Type) Signature Date	
INTE	RMAP SYSTEMS, INC. May 5, 2005	

Title of Signer (Print or Type)

Executive Vice President

Instruction.

Name of Signer (Print or Type)

Dean Stephens

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

			¥"		APPENDIX					
1	Intend to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification Under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	S Series A Preferred Stock*	Number of Accredited Investors	Accredited Non-Accredited					
AL										
AK										
AZ										
AR										
CA		X	\$12,000,000	6	\$12,000,000		,		X	
со			:							
СТ		X	\$2,500,000	1	\$2,500,000				X	
DE										
DC	***********						<u></u>			
FL										
GA	,									
HI										
ID							,			
IL :										
ĪN							,			
IA										
KS							,			
KY							,			
LA										
ME				· · · · · · · · · · · · · · · · · · ·						
MD										
MA										
Ml										
MN										
MS										
	L	L			L		<u> </u>			

^{*} Series A Preferred Stock, Common Stock issuable upon conversion of Series A Preferred Stock.

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				· A	APPENDIX		,		
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in State (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification Under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	S Series A Preferred Stock*	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT				· -			-		
NE									
NV :	-								
NH									
NJ									
NM									
NY									
NC									
ND									
ОН			,						
ОК									
OR									
PA									
RI									
SC									
SD					,		1000		
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									
WY									
PR									
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